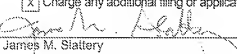


| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 1503-0191PUS1 | |
|---|---|---|-----------------------------------|-----------------------------|------|
| Application No. 10/589,554-Conf. #8535 | Filing Date August 16, 2006 | Examiner E. J. Hug | Art Unit 1791 | | |
| Applicant: Erkki AHO | | | | | |
| Invention: LOADING DEVICE FOR A SHOE PRESS | | | | | |
| <p>MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p> | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 18 | - 20 = | 0 | x 52.00 | 0.00 |
| Independent Claims | 1 | - 3 = | 0 | x 220.00 | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input checked="" type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
|  James M. Slatery Attorney Reg. No.: 28,380 | | | | Dated: <u>March 9, 2009</u> | |
| BIRCH, STEWART, KOLASCH & BIRCH, LLP 811G Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8015 | | | | | |